

PSYCHOPHARMACOLOGICAL TREATMENT IN A SAMPLE OF INPATIENTS WITH BIPOLAR DISORDER

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Introduction

Bipolar Disorder (BD) is a chronic illness and patients require longterm multi-disciplinary management. Psychopharmacological therapy remains the mainstay of this treatment.

Purpose

The main objective of this study is to describe the clinical characteristics and profile of psychopharmacological treatment of patients with BD admitted in an acute psychiatric unit during a 5 year period.

Methods

A descriptive and retrospective analysis evaluating hospitalizations between 2009 and 2014 was performed.

Results

Sample description: a total of 217 hospital admissions have been analyzed. A 65% were women. The mean age was 42.61 years (SD 11.94 years). An average of 27.83 days of hospitalization (SD 22.81 days) was observed.

Diagnosis: 49.8% were diagnosed of BD-I with a manic episode; 17.1% BD-I with mixed features episode; 16.1 % BD-I depressive episode; 8.8 % BD-I single manic episode; 2.8% BD- II; and a 5.6% non-specific episode.

Treatment with mood stabilizers at discharge: a 45.2% of the incomes received Valproic Acid as a main mood stabilizer, a 37.8% Lithium and a 12.9 other mood stabilizers. A 5.1% of the incomes not received treatment with mood stabilizers at discharge.

Antipsychotic treatment at discharge: a 30 % of incomes received Olanzapine, 27% Quetiapine, 10.6% Risperidone and a 21.8% other antipsychotics. A 10.6 % of incomes not received antipsychotic treatment at discharge.

Other: a 19.8 % of hospitalizations received antidepressant treatment and 54.4% benzodiazepines at discharge.

Conclusions

In this sample we found that the most commonly used antipsychotics are Olanzapine and Quetiapine, and the main mood stabilizers are Lithium and Valproic Acid.

References

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